## JULY 1, 2013 - JUNE 30, 2015 CONDOMINIUM ASSOCIATION BIENNIAL REGISTRATION APPLICATION

## ALL INFORMATION PROVIDED IS PUBLIC INFORMATION

## FOR OFFICE USE ONLY

593 01429233 906 01429234 主 3/35/14

100 DE

BIENNIAL REGISTRATION DEADLINE: Friday, May 31, 2013 (Bond exemption reapplication deadline: Tuesday, April 30, 2013)

1.	Pro	eject registration number: 85	,		Kanada kata da kacamatan da kacamatan kacamatan da kacamatan da kacamatan da kacamatan da kacamatan da kacamat		•		
	Na	me of condominium project: PEARL	MANOR APARTMENT	S			·		
	Pro	ject street address (required):	98-120 LIPOA PL AIE	A HI 96701					
	Tot	tal # units: <b>40</b>	Expiration of bond on	file with Comn	nission: <b>9/30/201</b> 3	1			
	NOTE: If no information is printed in the "Expiration of bond on file with Commission" field, the AOUO has previously applied for a fidelity bond exemption (all fidelity bond exemptions expire at the conclusion of the biennial registration period). Question #5 of this application allows the AOUO to select a fidelity bond exemption.								
2.	a.	List the names of the officers of the	e association (all inforn	nation provid	ed is public inform	nation)	<u>&gt;</u>		
		President (required): Debora	h Gerona	- <u></u>	<b>A</b> 555	<u> </u>	<u> </u>		
		Vice President (optional):	rey Lief		960 260		5.25		
		۸ اسلم.	·Young	, . 	王多哥		g g		
			Juarez	·		<u>ට</u> <u>්</u>	Section 200		
	b.	Designated officer (from section 2a	) i) for direct contact <i>(reg</i> i	uired):	The second	Φ	Dompton market		
		Title: President Name:	Deborah Geron	۵-	•				
		Mailing address (public): 98-1	•				•		
			· J.						
		city: Aira	Staté: 11 Zip:	96701	Day Phone:	166.48	74		
		City: Ala.  Public Email (optional):			Day Phone:	<b>%6.48</b> ≅	<u>점</u> 같 .		
3.	a.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices to	ndence & calls from Cor	nmission <i>(req</i>	uired):				
3.	a.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices	ndence & calls from Cor to update fidelity bond c	nmission <i>(req</i> overage, as w	uired):				
3.	a.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices to Title: Munique Name:	ndence & calls from Cor to update fidelity bond c Donald Garwo	nmission <i>(req</i> overage, as w	uired):	nce from	the Commission.		
3.	a.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices to Title:   Mailing Address: 1136 Unio	ndence & calls from Cor to update fidelity bond c Donald Garwo	nmission <i>(req</i> overage, as w	uired):	nce from	the Commission.		
3.	a.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices to Title: Properly Munity*Name:  Mailing Address: 1136 Unit City: Handley	ndence & calls from Cor to update fidelity bond c Donald Garwo m Mall, Suite 3	nmission <i>(req</i> overage, as w od 10 9(813	uired):	nce from	the Commission.		
3.	a. b.	Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices to Title: Properly Munique Name:  Mailing Address: 1136 Unit City: Handle	ndence & calls from Corto update fidelity bond of Donald Garwoom Mall, Suite 3  State: H Zip:	nmission (feq overage, as w od 10 9(813 identify the in	uired):  Pell as corresponde  Day Phone:	nce from	the Commission.		
3.		Public Email (optional):  Person to receive AOUO correspor This Individual will receive notices of Title:  Properly Munique Name:  Mailing Address:  City:  Public Email (optional):  Pursuant to Act 158, Session Laws	ndence & calls from Corto update fidelity bond of Donald Garwoom Mall, Suite 3  State: H Zip:	nmission (feq overage, as w od 10 9(813 identify the in	uired):  Pell as corresponde  Day Phone:	nce from	the Commission.		

TOTAL DUE

<del>-\$33</del>0

4.	Mar	anagement status (required): (check ONE only and fill in corresponding info)						
		Self-managed by Association of Unit Owners (see Instructions) Public Email:(Optional)	<del></del>					
		Title: Name:						
		Mailing Address:	•.					
		City: State: Zip: Day Phone:						
	g	- /A	<del> </del>					
		Management Company: Huakai Management (Optional)	<u> </u>					
		Mailing Address: 1136 Uhion Mall, Shike 310						
		City: Honolulu State: H Zip: 96813 Day Phone: 524-93	10					
5.	a.	Evidence of Fidelity Bond (required) (Between sections 5a and 5b CHECK ONE ONLY; see Question #1 for expiration date of bond on file with the Commission)	preprinted					
		No evidence of fidelity bond is attached because bond on file in Question #1 expires AFTER June 30, 20 Completed CSI form or certificate of insurance form is attached because bond on file in Question #1 exp OR BEFORE June 30, 2013, or evidence of current fidelity bonding is NOT on file with the Commission.	oires ON					
	b.	Bond Exemption (If applying for a bond exemption, select ONE of the following exemptions. A correspond exemption form on page B-2, B-3, or B-4 must be completed as part of the application process). An additional exemption application fee must be added to the preprinted total due on page A-1.	nding bond I \$50 bond					
		<ul> <li>Sole Owner: Where all condominium units are owned by a sole individual, sole corporation, sole partner sole Limited Liability Corporation ("LLC"), or sole Limited Liability Partnership ("LLP").</li> <li>20 or Fewer Units: Where the condominium project contains 20 or fewer units.</li> <li>100% Commercial Use: Where all condominium units are 100% commercial use.</li> </ul>	∍rship,					
6.	Ow	Owner occupancy: Percentage (estimate if not known) of residential use units in the project which are owner-occupied: ${rac{58}{}}$						
7.	Anı	nnual operating budget: Did the AOUO board of directors adopt an annual operating budget? ☑ Yes ☐ No If yes, is it distributed to each unit owner? ☑ Yes ☐ No						
8.	Ма	Maintenance fees: (see Instructions)						
	a. State the lowest and highest MONTHLY maintenance fees assessed for any unit in the last two years.							
		Lowest per month: \$						
	b.							
	C.	. What is the AOUO's total amount of current DELINQUENT maintenance fees over 90 days? \$ 2,762.0	Ŋ					
9.	Sp	Special assessments:						
· <b>0</b> •	a.	No. 17 No						
		If yes, how much per unit? \$						
		If yes, for what purpose?						
	<b>h</b>							
	b.							
		If yes, when?						
		If yes, how much per unit? \$						
		TO LOOK TOT WOOD DUTDOOG!						

10.	He	serve studies and replacement reserves: (see instructions)
	a.	Has the AOUO reserve study been annually updated? ☐ Yes ☐ No
	b.	Has the AOUO adopted an annual operating budget for replacement reserves? ☐Yes ☐ No
	c.	For the current fiscal year, is the AOUO collecting a minimum of fifty percent of the estimated replacement reserves OR funding one hundred percent of the estimated replacement reserves when using a cash flow plan?  Yes  No
	d.	Has the AOUO funded replacement reserves through special assessments? ☐ Yes ☑ No
	e.	Has the AOUO exceeded its annual operating budget during anytime in the last two fiscal years? ☐ Yes ☑ No If yes, where did the Association find the monies for the extra expenses? ☐ From Reserves ☐ From Special Assessments ☐ From a Combination of Reserves/Assessments ☐ Loan ☐ Increased Maintenance Fees
	f.	Where are the reserves deposited/invested? Select all that apply.  Deposited in a financial institution, including a federal or community credit union, located in the State and whose deposits are insured by an agency of the United States government; Held by a corporation authorized to do business under HRS Chapter 412, Article 8; Held by the United States Treasury; Purchased in the name of and held for the benefit of the association through a securities broker that is registered with the Securities and Exchange Commission, that has an office in the State, and the accounts of which are held by member firms of the New York Stock Exchange or National Association of Securities Dealers and insured by the Securities Insurance Protection Corporation; Demand deposits, investment certificates, savings accounts, and certificates of deposit; Obligations of the United States government, the State of Hawaii, or their respective agencies; Mutual funds comprised solely of investments in the obligations of the United, States government, the State of Hawaii, or their respective agencies; Out of state institution.
11.	Dog	es the AOUO conduct an annual financial audit of AOUO funds by a public accountant? 🗹 Yes, 🔲 No 📜 💥
		es the AOUO prohibit pets? Yes No If yes, are pet prohibitions stated in the recorded bylaws? Yes No
13.	Boa	es your AOUO maintain and make available for owner-review during reasonable hours a reference binder containing the ard of Directors Guides, Real Estate Commission brochures, HRS Chapters 514A and 514B, HAR Chapter 107, copies he declaration, bylaws, house rules and any amendments? ☑ Yes ☐ No
14.	a.	Has the AOUO made any changes to the common elements within the last two years? ☐ Yes ☐ Ño
	b.	Have all declaration and bylaw changes been recorded with the Bureau of Conveyance or the Land Court?  ☐ Yes ☐ No
15.	Has pro	s the AOUO amended the declaration, bylaws, condominium map or other constituent documents to adopt the visions of HRS Chapter 514B? 🔲 Yes 🗹 No
16.	a.	Has the AOUO utilized mediation or arbitration to resolve condominium disputes within the last two years?  Yes No If yes, how many times? Mediation: Arbitration:
	b.	Have any lawsuits been filed against the association in the last two years? ☐ Yes ☑ No
	c.	Are there any civil or criminal judgments entered against the association in the last two years? 🗌 Yes 🗂 No
17.	a.	Does the AOUO have a separate email account?   Yes No
		What is the association's public email address? (optional)
	b.	Does the AOUO maintain an internet website? ☐ Yes ☑ No
		What is the public website address? (optional)
18.	Hov Cha	w does the AOUO disseminate new information to homeowners regarding changes to bylaws, house rules, HRS apters 514A and 514B, and HAR Chapter 107? Select all that apply.
	П	Newsletter TVMailings □ Bulletin Board □ Email □ Website □ Other

## CERTIFICATION OF CONDOMINIUM ASSOCIATION OFFICER, DEVELOPER, 100% SOLE OWNER, OR MANAGING AGENT WITH DELEGATION OF DUTY TO REGISTER For the period July 1, 2013 – June 30, 2015

- 1. I have read and understand the Instructions.
- I certify that this application is complete as required, and is accompanied by the required documents and fees.
- 3. I certify that I am authorized to sign this certification on behalf of this condominium association, that the information provided is true and correct, and that there are no material omissions. (It is unlawful for any AOUO, its officers, board, or agents to file with the Commission any information that is false or contains a material misstatement of fact (HRS §§ 514A-134 and 514B-99.3). Any violation is a misdemeanor.
- 4. I certify that any changes to the required information provided in questions one (1) through five (5) of the registration application information, as required by HRS § 514B-103 (a) (1), shall be reported to the Real Estate Commission, in writing, within 10 days of the date of change. I further certify that the condominium association shall continue to update all other information during the biennial registration period as required by statute and provide updated information as requested by the Real Estate Commission. Also, written notification shall be provided to the Real Estate Commission at least 30 days prior to cancellation, termination, or a material change to the information provided in the evidence of fidelity bond coverage.
- 5. I certify that this condominium association does maintain continuous fidelity bond coverage in compliance with HRS § 514B-143 (a) (3), and that evidence of fidelity bonding or bond exemption shall be filed with the Real Estate Commission throughout this entire registration period. This condominium association acknowledges that its registration shall be automatically terminated for failure to provide the Real Estate Commission with evidence of continuous fidelity bond coverage (if applicable) through June 30, 2015.
- 6. This condominium association has received sufficient notice that if it fails to submit a completed registration application and fails to maintain continuous fidelity bond coverage or an approved fidelity bond exemption, it shall not have standing to maintain any action or proceeding in the courts of this State until it properly registers (HRS § 514B-103 (b)).

EAL ESTATE SRANCH

14 MAR 19 MIO 59

CONSUMER AFFAIR

STATE OF HAWAII

Signature of Association Officer, Developer, 100% Sole Owner, or Managing Agent (Original signature or stamp preferred, however facsimile or photocopied signatures are accepted)

Donald Garwood
Print Name

Peurl Munor Apartments (thunkin Munuaement)
Print Name of Condominium Association (Managing Agent include CMA Name)

CHECK ONE ONLY:[] President [] Vice-President [] Secretary [] Treasurer [] Developer or Developer's Agent registering for unorganized association [] 100% Sole Owner of Condominium Project [] Managing Agent with Delegation of Duty to Register

Mail or deliver all fees & documents to: Real Estate Branch, AOUO Registration, 335 Merchant St., Rm. 333, Honolulu, HI. 96813

If you need assistance: call (808) 586-2643 to speak to a condominium registration clerk.

This material can be made available for individuals with special needs. Please call the Senior Condominium Specialist at (808) 586-2643 to submit your request.